File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

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FOR INSTRUCTIONS, SEE BACK OF FORM

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T ax. 010-201-4073	DISCLOSURE SUMMARY PAGE		with with wallet	
COMMITTEE NAME (Must	be same as on Statement of Organization)  FOR SUPERVISOR	9 <del>9</del> 00	17 A110	: 35
MPORTANT: Indicate by # typ (1) Statewide/Legislative/Judge (4) County Central Committee	e of committee you are reporting for: Standing for Retention Candidate (2) State PAC (3) State Party 5) County Candidate (6) City Candidate (7) School Parent of City Candidate (7) School Parent of City Candidate (1) State Party	- 1	<b>DR-2</b> (Rev. 07/2007)	DISCLOSU REPORT
11 ) Local Ballot Issue	nty PAC (9) City PAC (10) School Board or Other Political Subdivision PAC		For Office Use On Comm. #	Y
CANDIDATE COMMITTEE	Name of the second seco	=	CONIII. #	

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IMPORTANT: Indicate by # type of committee you are reporting for: [ (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Control Committee (5) 200	)State PAC ( 3 )State Party		<b>DR-2</b> Rev. 07/2007)	DISCLOSURE REPORT
(4) County Central Committee (5) County Candidate (6) City Candid Subdivision Candidate (8) County PAC (9) City PAC (10) School B	oto (7)Cahaal Daard - Ou Buy	1 1		
11 ) Local Ballot Issue	oard or Other Political Subdivision PAC		or Office Use On	
CANDIDATE COMMITTEES ONLY:				
Candidate Name	Political Party (if applicable)			
Dead Wathe	<u>Republican</u>			· ·
Office Spught	District (if Senate or House)			
Stan Watne Office Sought County Supervisor	#4	] [	udited	
Late reports are subject to possible civil and criminal penalties. Purs	_			
SIGNATURE OF PERSON FILING REPORT	515-852-459 TELEPHONE	_ ر	/0-/	6-00
SIGNATURE OF FERSON FILING REPORT	TELEPHONE		DATE SI	GNED
1 AM FILING A DC+ 19, 2008	REPORT FOR (1) ELECTION /(2	NON-	ELECTION VEA	D
(report date)	Indicate by #	7		ux.
CHECK IF AMENDMENT TO REPORT DATED	<u></u>			
		cal Com	mittees, enter Date	e of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.)	Į Cu	unty & Lich Elect	ocal Committees, tion is held	enter County in
STATEMENT OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period. (Tota committee. This amount MUST be the same as the ca of the last reporting period or must be zero if this is first	sh on hand at the end	œ	0	ı
ADD TOTAL MONEY TAKEN IN THIS PERIOD	report med./	Ф		
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)		326	0.11
· ·				
Schedule F: Loans Received total (Attach Schedule F)				2
Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach				2
Schedule H: Total Sales of Campaign Property (Attach	Schedule H)			>
	Schedule H)ttees Only)	****	326	>
Schedule H: Total Sales of Campaign Property (Attach  (Schedule H applies to Candidates' Commi	Schedule H)	****	326	<del>2</del>
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Schedule H: Total Sales of Campaign Property (Attach  (Schedule H applies to Candidates' Commit  SUBTRACT TOTAL MONEY SPENT THIS PERIOD  Schedule B: Expenditures total (Attach Schedule B) (**)	Schedule H)Schedule H)Schedule H)SUB-TOTAL	\$	326	<del>2</del>
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**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

## For Instructions, See Back of Form

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

WATNE FOR SUPERVISOR

SCHEDULE	
(Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

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STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR
(WINNE DE FITT)	NUMBER		(if applicable)		RAISER
91-1-08	CK#	Stan Watne	Seif	\$ 76.11	
10-6-08	ID# CK#	Stan Watne Wright Co. Republican Women	Self	250.00	
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		TOTAL (if last pag	e of this schedule)	· 376 11	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_

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## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTE	E NAME (Must be s	same as on Statement of Organization)		
WA	TNE 1	GOR SUPERV	ISOR	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
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	CK#	No Expende	tres made	\$ 0
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			TOTAL (if last page of this schedule	

THIS BOX APPLIES TO CANDIDATES	S' COMMITTEES ONLY:
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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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